

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Effaith yr ôl-groniad o ran amseroedd aros ar bobl yng Nghymru sy'n aros am ddiagnosis neu driniaeth](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on the [impact of the waiting times backlog on people in Wales who are waiting for diagnosis or treatment](#)

WT 25

Ymateb gan: | Response from: Mind Cymru





Mind Cymru's response to the Health, Social Care & Sport Committee's Inquiry into the impact of the waiting times backlog on people in Wales who are waiting for diagnosis or treatment

About Mind Cymru

We're Mind Cymru, the mental health charity. We work nationally and locally.

Nationally, we campaign to raise awareness, promote understanding and drive change. We're also the first point of call for information and advice, providing mental health information to people in Wales over a million times every year. Locally, in communities across Wales, independent local Minds provide life-changing face-to-face support to more than 25,000 people each year.

Together, we won't give up until everyone experiencing a mental health problem gets support and respect.

We welcome the opportunity to provide evidence to the Committee on the impact of the waiting times backlog on people in Wales who are waiting for diagnosis or treatment.

Background

The coronavirus (Covid-19) pandemic has had a significant impact on the nation's mental health whilst exacerbating and compounding pre-existing challenges within mental health services, including long waiting-times for accessing support. Our evidence to the previous Health & Social Care Committee's inquiry into the impact of Covid-19, and its management, on health and social care provides evidence on the overall impact of the pandemic.¹ Additionally, Mind Cymru has published two research reports on the impact and consequences of the pandemic on mental health in Wales, which may provide further contextual evidence relevant to this inquiry.² **This submission focuses on what action we believe can and should be taken to ensure timely access to mental health services and to mitigate the impact of longer waiting times across health services.**

¹ <https://business.senedd.wales/documents/s102484/C59%20-%20Mind%20Cymru.pdf>

² <https://www.mind.org.uk/media-a/6176/the-mental-health-emergency-wales-summary-report-english-1.pdf> & <https://www.mind.org.uk/media/8961/the-consequences-of-coronavirus-for-mental-health-in-wales-final-report.pdf>

Mental Health Support for people waiting for physical health treatment

Poor physical health significantly increases the risk of experiencing mental health problems, and vice versa. Around 30 per cent of all people with a long-term physical health condition also have a mental health problem.³ The National Survey for Wales further demonstrates this relationship with mental wellbeing scores increasing in-line with general health status and significantly lower among those with long-term and or limiting illnesses.⁴

It is vital that health services, GPs and others involved in a person's care and treatment are aware of the relationship between mental and physical health and proactively encourage people to seek support early. Considerations of mental health support should be embedded across patient pathways and service-design to ensure timely access to appropriate support. For example, where a person is likely to face a long wait to access surgery or other treatment, information and or signposting should be provided to access support for their mental health.

There are services available that can provide short-term interventions for people who are experiencing mental health problems whilst waiting for treatment. These include primary mental health services, community and third sector support groups and online support. For example, the Welsh Government-funded SilverCloud, which is a self-guided online course for anxiety and depression. Improving pathways into these services provides an opportunity to deliver more seamless support and greater parity between physical and mental health.

In addition to supporting those waiting to access treatment, there is a need for improved ongoing psychological support for people receiving treatment, particularly those with long-term conditions who are at greater risk of experiencing mental health problems. Improved access to multidisciplinary teams within secondary care that can provide treatment for long-term conditions alongside integrated condition-specific psychological support should be prioritised for this patient group.

Digital and remote-based support

The pandemic has brought forward a rapid growth in the use of digital and remote-based support within mental health services. For some the move to remote appointments has been relatively seamless and stress-free. Often digital support programmes can be accessed straight away with no waiting times. This can be convenient for people as it allows them to choose when they want to access the programme. They are available at any time of the day and at times when there is limited alternative support, such as overnight.

Digital and remote-based services can be another useful source of support while waiting for face-to-face therapies or appointments. The risk for people with mental health problems not being able to access the support services they need, is that they become more unwell, potentially leading to crisis, so easier access to services and support is to be welcomed.

³ [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(12\)60240-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(12)60240-2/fulltext)

⁴ <https://gov.wales/sites/default/files/statistics-and-research/2019-02/national-survey-wales-mental-wellbeing-2016-17.pdf>

In December 2020-February 2021 we surveyed 1,914 people aged 13+ across England and Wales. Alongside the survey, we carried out 11 in-depth phone and video call interviews with people with mental health problems and published a report *Trying to connect*.⁵

While a third (34%) of people felt the wait time for phone or online support was the same as if it were face to face, 30% felt that getting support by phone, video call or online meant that they could access help more quickly. It's important to note that 16% felt the wait was actually longer for support by phone or online.

"I did some online therapy via SilverCloud. I was then transferred quickly to one to one telephone counselling. Previously when I have face-to-face counselling, I had to wait a couple of months." - Survey participant

"I got help earlier in my decline and therefore could respond better. If I had been left for 6 months, it could have reached crisis point." – Survey participant

Increased access to digital support may provide an opportunity to extend support as an interim measure for people waiting to access more specialist mental health support or who are waiting for physical health treatment which is having a negative impact on their mental health. Shorter waiting times are often a positive of remote support, but this needs to be balanced against remote services not being appropriate or helpful for everyone.

Examples of third sector support

Active Monitoring, which is delivered by Mind Cymru nationally in partnership with Local Mind's across Wales and funded by the Welsh Government, offers a 6-week guided self-help course for a range of mental health concerns. The service is open to all on a self-referral basis and delivers timely and short-term interventions for people experiencing a range of mental health problems. This can include people facing long waiting lists for more specialist mental health support but may also be beneficial for people experiencing physical health problems that are impacting on their mental health. Since June 2020, more than 7000 people have received support from Active Monitoring.

Mind Cymru's Social prescribing pilot, funded by the Welsh Government, supports people to access a wide range of activities and support in the local community. The service sees link workers recommend and help people to access a range of support and advice services to suit their needs, from housing and benefits support or advice to online counselling. These can include for example: practical help with shopping and prescriptions or peer support from others who have similar experiences.

Mind Cymru's Social Prescribing pilot worked with four Local Mind's across three health board areas. The pilot was established in February 2019. To-date, 2,224 have accessed the Social Prescribing pilot, the majority of whom (1,838) have received support since the outbreak of the pandemic in early-2020.

There are a wide range of services available via the third-sector, that can often be accessed quickly and can support people with their mental health whilst they wait for more specialist support, whether that is physical or mental health treatment. These services could provide a

⁵ <https://www.mind.org.uk/media/7592/mind-20582-trying-to-connect-report-low-res.pdf>

means for mitigating the negative mental health impact of waiting-times backlogs on health services by providing short-term support to those who need it. Improving links and referral processes between third-sector support and other health services is key to achieving this. Additionally, access to sustainable and long-term funding must be improved to maintain and expand third-sector provision.

Waiting times for statutory mental health services

It is important to note that even before the pandemic mental health services were under considerable pressure with growing demand and some people waiting a considerable time before being able to access support. In the early stages of the coronavirus pandemic referrals for mental health support fell significantly, in-line with other health services. The reduction in referrals had a positive impact on waiting times in the short-term. However, as the demand for support slowly returned to the levels we would usually expect, waiting times have significantly increased

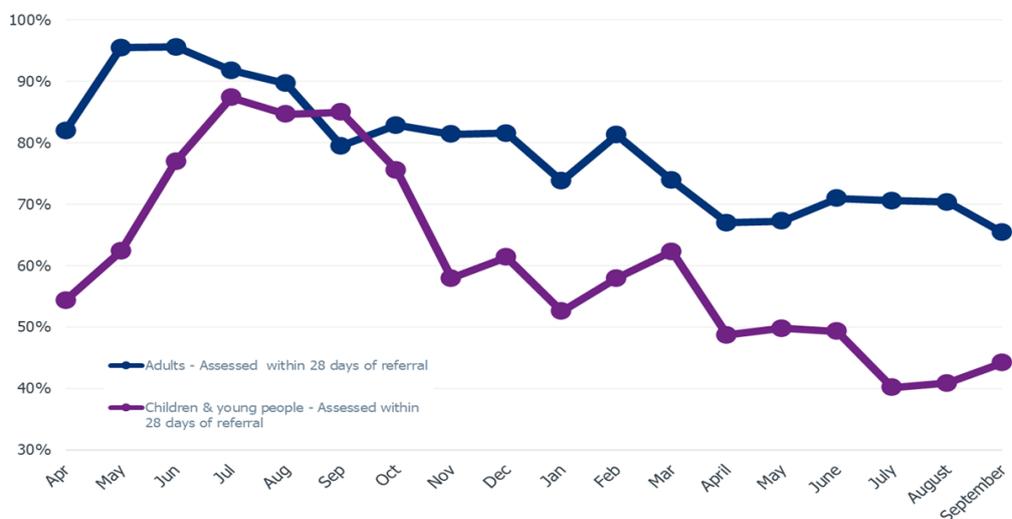
Local Primary Mental Health Support Services

The below graph shows the trend of increasing referrals to Local Primary Mental Health Support Services (LPMHSS) LPMHSS for all-ages, following a record low at the outset of the coronavirus pandemic in April 2020.



Source: Mind Cymru analysis of Local Primary Mental Health Services referrals April 2020 - September 2021, StatsWales.

Over the same period, waiting times for LPMHSS have increased, falling below the Welsh Government target for 80% of people to receive an assessment within 28-days of a referral. This is particularly true for children and young people who are significantly less likely than adults to receive an LPMHSS assessment within 28-days. Improving access to support and reducing waiting times for children and young people should be urgently prioritised by the Welsh Government and NHS Wales.



Source: Mind Cymru analysis of Local Primary Mental Health Services waiting times targets April 2020 - September 2021, StatsWales.

The relationship between referrals and waiting times highlights an important point for recovery planning, namely, recovery planning must simultaneously focus on reducing waiting times whilst maintaining or increasing access to support in a sustainable way. This will require targeted investment, innovation and a long-term plan to increase the mental health workforce.

Specialist Child and adolescent mental health services

Similarly, waiting times for specialist child and adolescent mental health services (SCAMHS) have grown significantly throughout the pandemic. The number of children and young people waiting longer than the 4-week target for a first-appointment with SCAMHS increased from 106 in February 2020 to 554 in October 2021. An increase of more than 420% and which further highlights the need to prioritise children and young people’s mental health services.

Despite similar targets existing for adults accessing secondary care mental health services, the equivalent waiting times figures are not collected by the Welsh Government. We recommend that data on these targets is collected and published regularly to ensure ongoing scrutiny and improvement.

Specialist psychological therapies

Early in 2021 we published a report, *Too long to Wait*, that looked at access to specialist psychological therapies in Wales.⁶ Improving access to psychological therapies is a key commitment of the Welsh Government’s ten year Together for Mental Health Strategy. The final Together for Mental Health Delivery Plan, which covers 2019-2022, includes

⁶ https://www.mind.org.uk/media/7181/too_long_to_wait.pdf

“Improving the access, quality and range of psychological for therapies children, working age and older adults” as one of six key priorities for the period. The Delivery Plan includes a commitment to publishing waiting times for access to psychological therapies within its first year; however, at the time of writing (January 2022), this information has not been published.

The Welsh Government target for people waiting to start psychological therapy is 26 weeks, with the expectation that 80% of people be seen within the target. Our view is that 26 weeks is too long to wait and raises questions of parity between physical and mental health services. Waiting times within primary care mental health services, for people with less severe mental health problems, are far more ambitious. Despite this, our research, which included freedom of information requests on waiting times for specialist psychological therapies in all Local Health Board areas found:

- The target for 80% of people to be seen within 26 weeks was not met in any of the 17 months to August 2020.
- In each month from April 2019 – August 2020, thousands of people across Wales were waiting longer than 26 weeks to access psychological therapy. Hundreds were waiting longer than a year.
- Before coronavirus, in the 11 months from April 2019 – February 2020, there was an average of 2054 people waiting longer than 26 weeks to start psychological therapy.
- Over the same period, on average there were 747 people waiting longer than a year.

We know that many people accessing mental health support feel they have limited choice, both in terms of the services they access and the length of time they are able to access support. In researching access to psychological therapies, people told us how much they value the support and the positive impact it has had on their mental health. Our survey, which provided a snapshot of some people’s experiences, reinforced this view. We heard that whilst many truly valued the benefit of psychological therapy, issues around access, waiting times, limited choice and number of sessions have negatively affected their experiences and left many still searching for support.

Our research confirms what many have long reported. Thousands of people across Wales are waiting too long for specialist psychological therapy. These issues pre-date the pandemic but, as with other services, the pandemic has had a significant impact, with less people accessing support and more people waiting longer.

Inequalities

We know that there are significant inequalities in terms of the impact of mental health problems across demographics. However, it is less clear how these inequalities play out within mental health services in terms of access and waiting times. Whilst we know that children and young people, as outlined above, are likely to wait longer than adults to access support, similar information is not collected for other groups. The delivery of the mental health core dataset must ensure that mental health services can accurately measure inequalities of access, waiting times and outcomes. We would like to see an Annual Report

on mental health services published by the Welsh Government which highlights differences by demographics, including all protected characteristics and socioeconomic disadvantage.

Recovery planning

It is important to note that even before the pandemic mental health services were under considerable pressure with growing demand with some people waiting a considerable time before being able to access support. Mental health has been the subject of several inquiries by various Senedd Committees throughout the previous Senedd term. These inquiries have highlighted the significant challenges within mental health services at multiple levels across Wales, making a range of recommendations for action. As a result, much of the framework for transforming mental health services and support is already in place, the challenge for the Welsh Government, NHS Wales and delivery partners is implementing those recommendations at pace. Priority in particular should be given to the recommendations of the fifth Senedd Children and young people's inquiry Mind over Matter and the recommendations of the fifth Senedd Health Committee inquiry into the mental health impact of Covid-19. Ongoing scrutiny is needed to ensure that these recommendations are delivered at the earliest possible opportunity.

We must also recognise the profound impact the pandemic has had on the delivery of services and support and the impact it has had on frontline staff across health and social care. This has caused unavoidable disruption to services that has had a negative impact on waiting times across services, however, mental health services were already experiencing significant challenges before the pandemic and as a result the impact on waiting times has been more significant.

Reducing the impact of the waiting times backlog on people's mental health will require improved access to primary care mental health services for all and ensuring interim support is provided to those facing long waiting lists for specialist mental health services.